

GRADIENT TERRACE

Name _____ Date _____

SWCD _____

Sec. _____ T. _____ R. _____  _____

LOCATION MAP



SHOW SECTION CORNER OF CENTER

Practice meets specifications with the following exceptions:

_____ sq. ft. to be seeded

Seeding completed _____ yes _____ no

_____ lin. ft. are eligible for cost sharing

Date _____ Signature _____

TERRACE DESIGN

[illegible]

Take a minimum of one cross section on every terrace checked.

[illegible]

Take sufficient readings to clearly outline true cross section.

Check on per group

Layout by _____ Date _____

[illegible]

GRADIENT TERRACE LAYOUT AND CHECK

[illegible]